

ANNUAL AND PERIODIC HEALTH AND HUMAN SERVICES REPORTS TO THE UTAH LEGISLATURE

EXCEPT AS OTHERWISE NOTED, ALL REPORTS ARE DUE
TO THE HEALTH AND HUMAN SERVICES INTERIM COMMITTEE
(Sorted by Report Date)

Office of Legislative Research and General Counsel, 3/30/07

#1 Division of Substance Abuse and Mental Health—Program Audits and Reviews of Mental Health Authorities and Contract Providers

Report Date: By July 1
Frequency: Annual
2007 Legislation: None
Special Notes: None
Statutory Cite: §62A-15-103, 712
§62A-15-103:

"(2) The division shall:...

- (f) conduct an annual program audit and review of each local substance abuse authority in the state and its contract provider and each local mental health authority in the state and its contract provider, including:
 - (i) a review and determination regarding whether:
 - (A) public funds allocated to local substance abuse authorities and local mental health authorities are consistent with services rendered and outcomes reported by them or their contract providers; and
 - (B) each local substance abuse authority and each local mental health authority is exercising sufficient oversight and control over public funds allocated for substance abuse and mental health programs and services; and
 - (ii) items determined by the division to be necessary and appropriate;
- (g) by July 1 of each year, provide to the Health and Human Services Interim Committee and the Health and Human Services Appropriations Subcommittee a written report that includes:
 - (i) the annual audit and review;
 - (ii) the financial expenditures of each local substance abuse authority and its contract provider and each local mental health authority and its contract provider;
 - (iii) the status of the compliance of each local authority and its contract provider with its plan, state statutes, and the provisions of the contract awarded; and
 - (iv) whether audit guidelines established under Section 62A-15-110 and Subsection 67-3-1(10) provide the division with sufficient criteria and assurances of appropriate expenditures of public funds; and
- (h) if requested by the Health and Human Services Interim Committee or the Health and Human Services Appropriations Subcommittee, provide an oral report as requested."

§62A-15-712:

- "(1) The division shall ensure that the requirements of this part are met and applied uniformly by local mental health authorities across the state.
- (2) Because the division must, under Section 62A-15-103, contract with, review, approve, and oversee local mental health authority plans, and withhold funds from local mental health authorities and public and private

providers for contract noncompliance or misuse of public funds, the division shall:

- (a) require each local mental health authority to submit its plan to the division by May 1 of each year; and
 - (b) conduct an annual program audit and review of each local mental health authority in the state, and its contract provider.
- (3) (a) The division shall:
- (i) provide a written report to the Health and Human Services Interim Committee by July 1 of each year; and
 - (ii) provide an oral report to that committee, as requested.
- (b) That report shall provide information regarding:
- (i) the annual audit and review;
 - (ii) the financial expenditures of each local mental health authority and its contract provider;
 - (iii) the status of each local authority's and its contract provider's compliance with its plan, state statutes, and with the provisions of the contract awarded; and
 - (iv) whether audit guidelines established under Subsections 62A-15-713(2)(a) and 67-3-1(10) provide the division with sufficient criteria and assurances of appropriate expenditures of public funds.
- (4) The annual audit and review described in Subsection (2)(b) shall, in addition to items determined by the division to be necessary and appropriate, include a review and determination regarding whether or not:
- (a) public funds allocated to local mental health authorities are consistent with services rendered and outcomes reported by it or its contract provider; and
 - (b) each local mental health authority is exercising sufficient oversight and control over public funds allocated for mental health programs and services.
- (5) The Legislature may refuse to appropriate funds to the division if the division fails to comply with the procedures and requirements of this section."

#2 Financial Assistance—Rural Mental Health Therapist Financial Assistance Program

Report Date: On or before August 1
Frequency: Annual
2007 Legislation: None
Special Notes: None
Statutory Cite: §62A-13-110

"Annually on or before August 1, the Division of Substance Abuse and Mental Health shall submit a written report of its activities under this chapter to the executive director of the department and to the Health and Human Services Interim Committee of the Legislature. The report shall include:

- (1) the number and type of grant and scholarship recipients;
- (2) the total amount of each grant and scholarship;
- (3) the site at which each grant recipient is practicing;
- (4) the site at which each scholarship recipient is practicing;

- (5) the number of applications filed under this chapter within the preceding year; and
- (6) the amount of administrative expenses incurred by the committee and by the department to provide staff support during the preceding year in carrying out the provisions of this chapter."

#3 Preferred Drug List

Report Date: By August 30
 Frequency: 2008
 2007 Legislation: Enacted
 Special Notes: None
 Statutory Cite: §26-18-2.4

- "(2) If the department implements a drug program under the provisions of Subsection (1)(c), the department shall:
- (a) determine the percentage of prescriptions that are paid for by the department which are overrides to the preferred drug list under Subsection (1)(d)(i);
 - (b) include the information required by Subsection (2)(a) in the report required by Subsection (2)(c); and
 - (c) report its findings regarding the drug program to the Legislative Health and Human Services Interim Committee by August 30, 2008, and to the Legislative Health and Human Services Appropriations Subcommittee during the 2009 General Session."

#4 Services to Persons With a Disability—Criteria and Prioritization

Report Date: Not specified
 Frequency: Periodic
 2007 Legislation: None
 Special Notes: Reports begin at or before the September 2002 interim meeting
 Statutory Cite: §62A-5-105

- "(2) The [Board of Services for People With Disabilities] shall: . . .
- (f) (i) periodically review the criteria used to determine who may receive services from the division and how the delivery of those services is prioritized within available funding; and
 - (ii) make periodic recommendations based on the review conducted under Subsection (2)(f)(i) to the Health and Human Services Interim Committee beginning at or before the September 2002 meeting of the committee; . . ."

#5 Tobacco Settlement Revenues

Report Date: No later than September 1
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §63-97-201

- "(6) Each state agency identified in Subsection (4) shall provide an annual report on the program and activities funded under Subsection (4) to:
- (a) the Health and Human Services Interim Committee no later than September 1; and
 - (b) the Health and Human Services Joint Appropriations Subcommittee."

#6 Cigarette Tax Increase—2002

Report Date: No later than September 1
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §59-14-204

- "(5) (d) The following revenue generated from the tax increase imposed under Subsection (1) during the 2002 General Session shall be deposited in the Cigarette Tax Restricted Account:
- (i) 22% of the revenue to be annually appropriated to the Department of Health for tobacco prevention, reduction, cessation, and control programs;
 - (ii) 15% of the revenue to be annually appropriated to the University of Utah Health Sciences Center for the Huntsman Cancer Institute for cancer research; and
 - (iii) 21% of the revenue to be annually appropriated to the University of Utah Health Sciences Center for medical education at the University of Utah School of Medicine....
 - (g) Any program or entity that receives funding under Subsection (5)(d) shall provide an annual report to the Health and Human Services Interim Committee no later than September 1 of each year. The report shall include:
 - (i) the amount funded;
 - (ii) the amount expended;
 - (iii) a description of the effectiveness of the program; and
 - (iv) if the program is a tobacco cessation program, the report required in Section 63-97-401."

#7 Evaluation of Health Insurance Market by Insurance Department

Report Date: Before October 1
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §31A-2-201

- "(7) (a) Each year, the commissioner shall:
- (i) conduct an evaluation of the state's health insurance market;
 - (ii) report the findings of the evaluation to the Health and Human Services Interim Committee before October 1; and
 - (iii) publish the findings of the evaluation on the department website.
- (b) The evaluation required by Subsection (7)(a) shall:
- (i) analyze the effectiveness of the insurance regulations and statutes in promoting healthy, competitive health insurance market that meets the needs of Utahns by assessing such things as:
 - (A) the availability and marketing of individual and group products;
 - (B) rate changes;
 - (C) coverage and demographic changes;
 - (D) benefit trends;
 - (E) market share changes; and
 - (F) accessibility;

- (ii) assess complaint ratios and trends within the health insurance market, which assessment shall integrate complaint data from the Office of Consumer Health Assistance within the department;
- (iii) contain recommendations for action to improve the overall effectiveness of the health insurance market, administrative rules, and statutes; and
- (iv) include claims loss ratio data for each insurance company doing business in the state.
- (c) When preparing the evaluation required by this Subsection (7), the commissioner may seek the input of insurers, employers, insured persons, providers, and others with an interest in the health insurance market."

#8 Children's Health Insurance Program

Report Date: Before November 1

Frequency: Annual

2007 Legislation: None

Special Notes: None

Statutory Cite: §26-40-109

- "(1) The department shall develop performance measures and annually evaluate the program's performance.
- (2) The department shall report annually on its evaluation to the Health and Human Services Interim Committee of the Legislature before November 1."

#9 HIPUtah Pilot Program for Discounted Bleeding Disorder

Drugs

Report Date: Prior to October 30 or discontinuation of pilot program

Frequency: One-time, prior to October 30, 2010

2007 Legislation: None

Special Notes: None

Statutory Cite: §31A-29-113.5

- "(1) Beginning July 1, 2005, and ending on July 1, 2010, the pool policy shall include a pilot program for hemophilia and bleeding disorders in accordance with this section....
- (4) (a) The board shall report to the commissioner and to the Health and Human Services Interim Committee prior to October 30, 2010 regarding the claims experience and pharmaceutical costs under the pilot program.
- (b) the board may discontinue the pilot program created in this section prior to July 1, 2010, if prior to discontinuing the pilot program:
 - (i) the board reports on the need to discontinue the pilot program to the Health and Human Services Interim Committee and the Commerce and Revenue Appropriations Subcommittee; and
 - (ii) either:
 - (A) the commissioner and the board determine that the requirements of the pilot program jeopardize the actuarial soundness of the pool; or
 - (B) the entity that is qualified as a 340B Drug Pricing Program is disqualified by federal law from providing 340B drug pricing discounts to enrollees in the pool."

#10 Drug Offender Reform Pilot Study

Report Date: On or before November 1

Frequency: Annual

2007 Legislation: None

Special Notes: Final written report due on or before November 1, 2008

Statutory Cite: §63-25a-205.5

- "(1) As used in this section:
 - (a) "Council" means the Utah Substance Abuse and Anti-Violence Coordinating Council.
 - (b) "Drug Offender Reform Pilot Study" and "study" mean the screening, assessment, and substance abuse treatment provided to convicted offenders as part of a study described in this section and conducted as described in Section 77-18-1.1 in the courts of the Third Judicial District located in Salt Lake County.
 - (c) "Substance abuse authority" means the Salt Lake County substance abuse authority operating within the Third Judicial District.
- (2) There is established a Drug Offender Reform Pilot Study in the courts of the Third Judicial District located in Salt Lake County.
 - (a) The study shall operate on and after July 1, 2005, through June 30, 2008, subject to legislative funding.
 - (i) The study shall conduct screening under Subsection 77-18-1.1(2)(a) through June 30, 2007, and shall conduct assessments and substance abuse treatment based on this screening under Subsections 77-18-1.1(2)(b) and (c).
 - (ii) The assessments and treatment based on screening conducted on and before June 30, 2007, shall be conducted by the study through June 30, 2008, the final date of the study.
 - (b) The study shall provide screening and assessment under Section 77-18-1.1 to offenders convicted in the courts of the Third Judicial District in Salt Lake County of a felony offense in violation of Title 58, Chapter 37, Utah Controlled Substances Act.
 - (c) The study shall provide substance abuse treatment under Section 77-18-1.1 to a maximum of 250 offenders convicted under Subsection (2)(b) and who are sentenced to probation in Salt Lake County if:
 - (i) the assessment indicates treatment is appropriate; and
 - (ii) the court finds treatment to be appropriate for the offender.
- (3) The council shall provide ongoing oversight of the implementation and functions of the study.
- (4) The council shall develop an implementation plan for the study, which shall:
 - (a) include guidelines on how funds appropriated for the study should be used;
 - (b) include guidelines on the membership of the Salt Lake County planning group under Subsection (5); and
 - (c) require that treatment plans under the study are appropriate for criminal offenders.
- (5) (a) The Salt Lake County substance abuse authority located within the Third Judicial District shall establish a local planning group to develop and submit a plan to the council detailing the intended use of the study funds. The uses shall

- be in accordance with the guidelines established by the council under Subsection (4).
- (b) Upon approval of the plan by the council, the Department of Human Services shall allocate the funds to the substance abuse authority.
 - (c) The substance abuse authority shall submit to the Department of Human Services and the council, on or before October 1 of each year, reports detailing use of the funds and the impact and results of the use of the funds.
 - (6) The council shall evaluate the progress of the study and shall provide a written report to the Law Enforcement and Criminal Justice Interim Committee and the Health and Human Services Interim Committee annually on or before November 1, and shall provide to these interim committees a final written report on the impact and results of the study on or before November 1, 2008."

#11 Primary Care Grants to Public and Nonprofit Entities

Report Date: November 1
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §26-18-305

"The department shall report to the Health and Human Services Interim Committee by November 1, 1994, and every year thereafter on the implementation of the grant program for primary care services. The report shall include a description of the scope and level of coverage provided to low-income persons by primary care grant programs."

#12 Hemophilia Services Grant Program

Report Date: By November 1
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: 26-47-103

- "(2) (a) Within appropriations specified by the Legislature for this purpose, the department shall make grants to public and nonprofit entities who assist persons with bleeding disorders with the cost of obtaining hemophilia services or the cost of insurance premiums for coverage of hemophilia services.
- (b) The department shall report to the Health and Human Services Interim Committee and to the Legislative Executive Appropriations Committee by November 1, 2006, and every year thereafter on the implementation of the grant program."

#13 Health Insurance Benefit Design

Report Date: Prior to November 15
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §31A-22-633

"Notwithstanding the provisions of Title 31A, Insurance Code, any accident and health insurer or health maintenance organization may offer a choice of coverage that is less or different than is otherwise required by applicable state law if:

- (1) the Department of Health offers a choice of coverage as part of a Medicaid waiver under Title 26, Chapter 18, Medical Assistance Act, which includes:
 - (a) less or different coverage than the basic coverage;

- (b) less or different coverage than is otherwise required in an insurance policy or health maintenance organization contract under applicable state law; or
- (c) less or different coverage than required by Subsection 31A-22-605(4)(b); and
- (2) the choice of coverage offered by the carrier:
 - (a) is the same or similar coverage as the coverage offered by the Department of Health under Subsection (1);
 - (b) is offered to the same or similar population as the coverage offered by the Department of Health under Subsection (1); and
 - (c) contains an explanation for each insured of coverage exclusions and limitations;
- (3) the commissioner and the executive director of the Department of Health shall report to the Health and Human Services Interim Committee prior to November 15 of each year concerning:
 - (a) the number of lives covered under any policy offered under the provisions of this section or under the Medicaid waiver described in Subsection (1);
 - (b) the claims experienced under the policies or Medicaid programs described in Subsection (3)(a);
 - (c) any cost shifting to the private sector for care not covered under the programs or policies described in Subsection (3)(a); and
 - (d) efforts or agreements between the Department of Health, the commissioner, insurers regulated under this chapter, and health care providers regarding combining publicly funded coverage with private, employer-based coverage to increase benefits and health care coverage."

#14 New Programs and Agencies

Report Date: On or before November meeting
 Frequency: As needed
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §36-24-101

- "(1) When legislation is passed that creates a new program or agency, the legislative sponsor shall consider providing that the funding for the first fiscal year should be nonlapsing, with the option of continuing those nonlapsing monies for an additional year.
- (2) The legislative interim committee with oversight responsibility for the new program or agency:
 - (a) shall hear the limited scope audit report prepared by the Office of Legislative Auditor General as provided in Section 36-12-15 on or before the committee's November meeting;
 - (b) shall review each new program or agency on which it receives a report to assure that it is being implemented in a manner consistent with its statutory directive;
 - (c) shall determine whether the statutory directive is being followed and whether any change in law is necessary and if a change in law is necessary, make that recommendation to the Legislature; and
 - (d) may request the Office of Legislative Auditor General to conduct a more in-depth review of the program or agency."

#15 Pain Medication Management and Education

Report Date: No later than November interim meeting

Frequency: 2007, 2008
 2007 Legislation: Enacted
 Special Notes: None
 Statutory Cite: §26-1-36

- "(1) As used in this section, "opiate" means any drug or other substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of conversion into a drug having addiction-forming or addiction-sustaining liability.
- (2) In addition to the duties listed in Section 26-1-30, the department shall develop and implement a two-year program in coordination with the Division of Professional Licensing, the Utah Labor Commission, and the Utah attorney general, to:
- (a) investigate the causes of and risk factors for death and nonfatal complications of prescription opiate use and misuse in Utah for chronic pain by utilizing the Utah Controlled Substance Database created in Section 58-37-7.5;
 - (b) study the risks, warning signs, and solutions to the risks associated with prescription opiate medications for chronic pain, including risks and prevention of misuse and diversion of those medications; and
 - (c) provide education to health care providers, patients, insurers, and the general public on the appropriate management of chronic pain, including the effective use of medical treatment and quality care guidelines that are scientifically based and peer reviewed.
- (3) The department shall report on the development and implementation of the program required in Subsection (2) to the legislative Health and Human Services Interim Committee and the legislative Business and Labor Interim Committee no later than the November interim meetings in 2007 and 2008. Each report shall include:
- (a) recommendations on:
 - (i) use of the Utah Controlled Substance Database created in Section 58-37-7.5 to identify and prevent:
 - (A) misuse of opiates;
 - (B) inappropriate prescribing; and
 - (C) adverse outcomes of prescription opiate medications;
 - (ii) interventions to prevent the diversion of prescription opiate medications; and
 - (iii) medical treatment and quality care guidelines that are:
 - (A) scientifically based; and
 - (B) peer reviewed; and
 - (b)
 - (i) a measure of results against expectations under the program as of the date of the report; and
 - (ii) an analysis of the application of the program, use of the appropriated funds, and the impact and results of the use of the funds.
- (4) The report provided under Subsection (3) for the 2008 interim shall also provide a final cumulative analysis of the measurable effectiveness of the program implemented under this section."

#16 Medical Examiner Testing for Substances in Cases of Suspected Suicide

Report Date: On or before November 30
 Frequency: Annual, beginning in 2008
 2007 Legislation: Enacted

Special Notes: None
 Statutory Cite: §26-4-28

- "(1) In all cases where it is suspected that a death resulted from suicide, including assisted suicide, the medical examiner shall endeavor to have the following tests conducted upon samples taken from the body of the deceased:
- (a) a test that detects all of the substances included in the volatiles panel of the Bureau of Forensic Toxicology within the Department of Health;
 - (b) a test that detects all of the substances included in the drugs of abuse panel of the Bureau of Forensic Toxicology within the Department of Health; and
 - (c) a test that detects all of the substances included in the prescription drug panel of the Bureau of Forensic Toxicology within the Department of Health.
- (2) The medical examiner shall maintain information regarding the types of substances found present in the samples taken from the body of a person who is suspected to have died as a result of suicide or assisted suicide.
- (3)
 - (a) Beginning in 2008, on or before November 30 of each year, the Department of Health shall present a report on the information described in Subsection (2) to the Health and Human Services Interim Committee.
 - (b) The information described in Subsection (3)(a) may not contain any identifying information regarding any person to whom the information described in Subsection (2) relates.
- (4) Within funds appropriated by the Legislature for this purpose, the medical examiner shall provide compensation, at a standard rate determined by the medical examiner, to a deputy medical examiner who collects samples for the purposes described in Subsection (1)."

#17 Sale of Raw Whole Milk

Report Date: On or before November 30
 Frequency: 2008, 2009
 2007 Legislation: Enacted
 Special Notes: None
 Statutory Cite: §4-3-14

- "(7) For 2008 and 2009, the Department of Health and the Department of Agriculture and Food shall report on or before November 30th to the Natural Resources, Agriculture, and Environment Interim Committee and the Health and Human Services Interim Committee on any health problems resulting from the sale of raw whole milk at self-owned retail stores."

#18 Rural Residency Training Pilot Program

Report Date: By November 30
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §63C-8-106

- "(2)
 - (a) Subject to appropriations from the Legislature, the council shall establish a pilot program to place physicians into rural residency training programs.
 - (b) The pilot program shall begin July 1, 2005 and sunset July 1, 2015, in accordance with Section 63-55-263.
- (3)
 - (a) The council shall report to the Legislature's Health and Human Services Interim Committee

concerning the implementation of the pilot program and the success of the program in increasing the retention or recruitment of physicians in rural counties in the state.

- (b) The report required by this Subsection (3) shall be made by November 30 of each year."

#19 Drug Utilization Review Board

Report Date: December 1
Frequency: Annual
2007 Legislation: None
Special Notes: Legislative leadership, not Interim Committee, specified as recipient of report
Statutory Cite: §26-18-103

"(11) publish an annual report, subject to public comment prior to its issuance, and submit that report to the United States Department of Health and Human Services by December 1 of each year. That report shall also be submitted to legislative leadership, the executive director, the president of the Utah Pharmaceutical Association, and the president of the Utah Medical Association by December 1 of each year. The report shall include:

- (a) an overview of the activities of the board and the DUR program;
- (b) a description of interventions used and their effectiveness, specifying whether the intervention was a result of underutilization or overutilization of drugs, without disclosing the identities of individual physicians, pharmacists, or recipients;
- (c) the costs of administering the DUR program;
- (d) any fiscal savings resulting from the DUR program;
- (e) an overview of the fiscal impact of the DUR program to other areas of the Medicaid program such as hospitalization or long-term care costs;
- (f) a quantifiable assessment of whether DUR has improved the recipient's quality of care;
- (g) a review of the total number of prescriptions, by drug therapeutic class;
- (h) an assessment of the impact of educational programs or interventions on prescribing or dispensing practices; and
- (i) recommendations for DUR program improvement;"

#20 Supported Employment Services Pilot Program

Report Date: During the 2007 interim
Frequency: One-time
2007 Legislation: None
Special Notes: None
Statutory Cite: §62A-5-103.1

"(6) The director of the division [of Services for People With Disabilities] shall report to the Health and Human Services Interim Committee during the 2007 interim regarding:

- (a) the operation and accomplishments of the pilot program described in this section;
- (b) whether the Legislature should convert the pilot program to an ongoing program within the division; and
- (c) recommendations for changes, if any, relating to the pilot program.

(7) During the 2007 interim, the Health and Human Services Interim Committee shall:

- (a) hear or review the report described in Subsection (6); and
- (b) determine whether the pilot program described in this section should be converted to an ongoing program within the division."

#21 Family Preservation Services Pilot Program

Report Date: During the 2008 interim
Frequency: One-time
2007 Legislation: Enacted
Special Notes: None
Statutory Cite: §62A-5-103.2

"(7) The director of the division shall report to the Health and Human Services Interim Committee during the 2008 interim regarding:

- (a) the operation and accomplishments of the pilot program described in this section;
- (b) whether the Legislature should convert the pilot program to an ongoing program within the division; and
- (c) recommendations for changes, if any, related to the pilot program.

(8) During the 2008 interim, the Health and Human Services Interim Committee shall:

- (a) hear or review the report described in Subsection (7); and
- (b) determine whether the pilot program described in this section should be converted into an ongoing program within the division."

#22 Center for Multicultural Health

Report Date: Not specified
Frequency: Annual
2007 Legislation: None
Special Notes: Legislature, not Interim Committee, specified as recipient of report
Statutory Cite: §26-7-2

"(3) The Center for Multicultural Health shall:

- (a) promote and coordinate the research, data production and dissemination, education, and health promotion activities of the department, local health departments, local mental health authorities, public schools, community-based organizations, indian tribes, and other organizations within the state as they relate to multicultural and minority health issues;
- (b) assist in the development and implementation of programs to address multicultural and minority health issues;
- (c) promote the dissemination and use of information on multicultural and minority health issues by minority populations, health care providers, and others;
- (d) seek federal funding and other resources to accomplish its mission;
- (e) provide technical assistance to entities within the state seeking funding to study or address multicultural and minority health issues;
- (f) develop and increase the capacity of the center to:
 - (i) ensure the delivery of qualified timely culturally appropriate translation services across all department programs; and
 - (ii) provide, where appropriate, linguistically competent translation and communication services for limited English proficiency individuals;

- (g) provide staff assistance to any advisory committee created by the department to study multicultural and minority health issues; and
- (h) annually report to the Legislature on its activities and accomplishments.

#23 Child Welfare Legislative Oversight Panel

Report Date: Not specified
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §62A-4a-207

"(4) The panel shall: . . .

- (i) annually report its findings and recommendations to the president of the Senate, the speaker of the House of Representatives, the Health and Human Services Interim Committee, and the Judiciary Interim Committee."

#24 Disability Determination Services Advisory Council

Report Date: Not Specified
 Frequency: Annual
 2007 Legislation: None
 Special Notes: None
 Statutory Cite: §53A-15-205

"(10) The council shall:

- (a) advise DDDS and the Social Security Administration regarding its practices and policies on the determination of claims for social security disability benefits;
- (b) participate in the development of new internal practices and procedures of DDDS and policies of the Social Security Administration regarding the evaluation of disability claims;
- (c) recommend changes to practices and policies to ensure that DDDS is responsive to disabled individuals;
- (d) review the DDDS budget to ensure that it is adequate to effectively evaluate disability claims and to meet the needs of persons with disabilities who have claims pending with DDDS; and
- (e) review and recommend changes to policies and practices of allied state and federal agencies, health care providers, and private community organizations.

- (11) The council shall annually report to the board, the governor, and the Legislative Health and Human Services Interim Committee regarding its activities."

#25 Health Data Committee

Report Date: Not specified
 Frequency: Biennial
 2007 Legislation: None
 Special Notes: Legislature, not Interim Committee, specified as recipient of report
 Statutory Cite: §26-33a-104

"(2) The committee shall:

- (a) develop and adopt by rule, following public hearing and comment, a health data plan that shall among its elements:
 - (i) identify the key health care issues, questions, and problems amenable to resolution or improvement through better data, more extensive or careful analysis, or improved dissemination of health data;

- (ii) document existing health data activities in the state to collect, organize, or make available types of data pertinent to the needs identified in Subsection (2)(a)(i);
- (iii) describe and prioritize the actions suitable for the committee to take in response to the needs identified in Subsection (2)(a)(i) in order to obtain or to facilitate the obtaining of needed data, and to encourage improvements in existing data collection, interpretation, and reporting activities, and indicate how those actions relate to the activities identified under Subsection (2)(a)(ii);
- (iv) detail the types of data needed for the committee's work, the intended data suppliers, and the form in which such data are to be supplied, noting the consideration given to the potential alternative sources and forms of such data and to the estimated cost to the individual suppliers as well as to the department of acquiring these data in the proposed manner; the plan shall reasonably demonstrate that the committee has attempted to maximize cost-effectiveness in the data acquisition approaches selected;
- (v) describe the types and methods of validation to be performed to assure data validity and reliability;
- (vi) explain the intended uses of and expected benefits to be derived from the data specified in Subsection (2)(a)(iv), including the contemplated tabulation formats and analysis methods; the benefits described must demonstrably relate to one or more of the following: promoting quality health care, managing health care costs, or improving access to health care services;
- (vii) describe the expected processes for interpretation and analysis of the data flowing to the committee; noting specifically the types of expertise and participation to be sought in those processes; and
- (viii) describe the types of reports to be made available by the committee and the intended audiences and uses;
- (b) have the authority to collect, validate, analyze, and present health data in accordance with the plan while protecting individual privacy through the use of a control number as the health data identifier;
- (c) evaluate existing identification coding methods and, if necessary, require by rule that health data suppliers use a uniform system for identification of patients, health care facilities, and health care providers on health data they submit under this chapter;
- (d) report biennially to the governor and the Legislature on how the committee is meeting its responsibilities under this chapter; and
- (e) advise, consult, contract, and cooperate with any corporation, association, or other entity for the collection, analysis, processing, or reporting of health data identified by control number only in accordance with the plan."

#26 Licensed Direct-entry Midwives

Report Date: 2006 through 2011

Frequency: Annual

2007 Legislation: None

Special Notes: None

Statutory Cite: §58-77-201

- "(3) (c) (i) For the years 2006 through 2011, the [Licensed Direct-entry Midwife] board shall present an annual report to the Legislature's Health and Human Services Interim Committee describing the outcome data of licensed Direct-entry midwives practicing in Utah.
- (ii) The board shall base its report on data provided in large part from the Midwives' Alliance of North America."

#27 Low and Moderate Income Housing

Report Date: Not specified

Frequency: Annual

2007 Legislation: None

Special Notes: None

Statutory Cite: §9-4-1204

- "(1) Within appropriations from the Legislature, the division [of Housing and Community Development within the Department of Community and Culture] shall establish a program to assist municipalities to meet the requirements of Section 10-9a-408 and counties to meet the requirements of Section 17-27a-408. Assistance under this section may include:
- (a) financial assistance for the cost of developing a plan for low and moderate income housing;
- (b) information on how to meet present and prospective needs for low and moderate income housing; and
- (c) technical advice and consultation on how to facilitate the creation of low and moderate income housing.
- (2) The division shall annually report to the Workforce Services and Community and Economic Development Interim Committee, and to the Health and Human Services Interim Committee regarding the scope, amount, and type of assistance provided to municipalities and counties under this section, including the number of low and moderate income housing units constructed or rehabilitated within the state."

#28 Medical Education Council

Report Date: Not specified

Frequency: Not specified

2007 Legislation: None

Special Notes: Legislature, not Interim Committee, specified as recipient of report

Statutory Cite: §63C-8-104

- "(3) study and recommend options for financing graduate medical education to the State Board of Regents and the Legislature;
- (4) advise the State Board of Regents and the Legislature on the status and needs of health care professionals in training;"

#29 Utah Commission on Aging

Report Date: Not Specified

Frequency: Annual

2007 Legislation: None

Special Notes: Executive Appropriations Committee, not Interim Committee, specified as recipient of report

Statutory Cite: §63-99-107

- "(1) The commission shall annually prepare and publish a report directed to the:
- (a) governor; and
- (b) Executive Appropriations Committee of the Legislature.
- (2) The report described in Subsection (1) shall:
- (a) describe how the commission fulfilled its statutory purposes and duties during the year; and
- (b) contain recommendations on how the state should act to address issues relating to the aging population."

#30 Utah Comprehensive Health Insurance Pool (HIP)

Report Date: Not specified

Frequency: Annual

2007 Legislation: None

Special Notes: Legislature, not Interim Committee, specified as recipient of report

Statutory Cite: §31A-29-106

- "(2) (a) The [Utah Comprehensive Health Insurance Pool] board shall prepare and submit an annual report to the Legislature which shall include:
- (i) the net premiums anticipated;
- (ii) actuarial projections of payments required of the pool;
- (iii) the expenses of administration; and
- (iv) the anticipated reserves or losses of the pool."

#31 Utah Substance Abuse and Anti-Violence Coordinating Council

Report Date: Not specified

Frequency: Annually

2007 Legislation: None

Special Notes: Legislature, not Interim Committee, specified as recipient of report

Statutory Cite: §63-25a-203

- "(1) The Utah Substance Abuse and Anti-Violence Coordinating Council shall:...
- (e) coordinate recommendations made by the committees under Section 63-25a-206; and
- (f) analyze and provide an objective assessment of all proposed legislation concerning alcohol and other drug issues and community violence issues...
- (3) The council shall report its recommendations annually to the commission, governor, Legislature, and judicial council."